

# UTILITY PATENT APPLICATION TRANSMITTAL

☐ DUPLICATE

Address to:  
Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Attorney Docket No.	EGIL3002/JEK/JJC
First Named Inventor (or identifier)	EGILL S. EGILSSON
Total Pages	36

Transmitted herewith is a patent application under 37 CFR 1.53(b).

Entitled: **SUSPENSION LINER WITH SEAL**

- ☒ 1. Submitted herewith are the following:

23 pages of specification.  
☒ Abstract.  
7 sheet(s) of drawings.  
32 claim(s).  
☒ Oath/Declaration signed by each inventor.  
☒ Application Data Sheet.  
☐ Preliminary Amendment.  
☐ Information Disclosure Statement(s).  
☐ pages of Form PTO-1449, and one copy of each document listed thereon.  
☒ Assignment of the invention, Cover Sheet, and payment of the \$ 40.00 recordal fee.  
☐ certified copy of application no. \_\_\_\_\_ filed in \_\_\_\_\_. Priority is claimed.  
☒ check in the amount of \$ 1,198.00 including any assignment recordal fee.

- ☐ 2. SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.


- ☒ 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.

- ☐ 4. Insert before the first sentence of the specification: - - This application claims the benefit of provisional application number \_\_\_\_\_ filed \_\_\_\_\_. - -

- ☐ 5. Insert before the first sentence of the specification: - - This application is a Continuation-in-part of nonprovisional application number \_\_\_\_\_ filed \_\_\_\_\_. - -

- ☐ 6. Other: \_\_\_\_\_

The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.

THE FILING FEE IS CALCULATED AS FOLLOWS:				Basic Fee:	\$770.00
Total Claims:	32	- 20 =	12	X \$18 =	\$216.00
Independent Claims:	5	- 3 =	2	X \$86 =	\$172.00
Correspondence Address:  23364 Customer Number				Multiple Dependent Claim (add \$290.00):	
				Subtotal:	\$1,158.00
				50% Reduction if Small Entity Status:	
Phone: 703-683-0500 Fax: 703-683-1080				Total:	\$1,158.00
Date:	Name:		Signature:		Reg. No.
October 23, 2003	JUSTIN J. CASSELL				46,205